Withdrawal of the Analgin formulations in other countries

44.SHRI DAYANAND SAHAY? Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to answer to Unstarred Ques-tion 487 given in the Rajya Sabha on the llth November, 1987 and state:

(a) whether it is a fact that anal-gin and its formulations have been withdrawn for human consumption in a number of countries; if so, what are the reasons therefor;

(b) what are the names of those countries;

(c) whether it is also a fact that combination of Analgin with Oxyp-henbutazone and Phenylbutazone as well as with Paracetamol, have also been withdrawn by most of the important countries, including West Germany the originator of Analgin as being dangerous for human consumption .

(d) whether it is a fact that these combinations are being marketed in the country; and

(e) whether Government have since investigated, with the help of an expert committee, the rationality for continued marketing of combinations of Analgin with other drugs; if so, what are the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) and Ob) Analgin and its formulations continue to be marketed by many countries. They have been withdrawn in some countries including Australia, Canada, USA, Sweden, Denmark, Jordan, Singapore etc. on the grounds of occurence of agranulocytosis as an adverse reaction to the drug.

(c) As per the information available with this Ministry while analgin preparations have been withdrawn in some countries these continue to be marketed in other countries.

(d) Yes Sir.

(e) Boston Surveillance study has ruled out any greater absolute risk of agranulocytosis (blood Cell disorder) due to Analgin compared to other non-steroidal anti-inflammatory drugs. Report of the Boston study was considered by the Drugs Technical Advisory Board and the manu- » facturers of combination of Analgin with other drugs have been asked by the Committee to prove through controlled clinical trials the advantage of the combination over single drugs and that such combinations are safe for use in their respective recommended doses.

Report of the sub-committee on inter-national drug combinations

145. SHRI DAYANAND SAHAY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to Unstarred Question 1124 given in the Rajya Sabha on the 29th April, 1987 and state:

(a) whether sub-committee of Drugs Consultative Committee has submitted its report regarding irrational combination of drugs;

(b) if so, when; and what are the details thereof;

(c) if not. by when the repot is likely to be submitted;

(d) what are the names of com binations of drugs which the Com-mittee found irrational; and

(e) by when the same are likely to be withdrawn for human consump tion?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) Yes, Sir.

(b) to (e) The recommendations of the sub-committee were placed at the meeting of the Drugs Technical Advisory Board held at New Delhi OP. 22-4-1988. The Board had agreed to

the recommendations of the subcommittee lor -weeding out certain combination of drugs, a statement about which is annexed. (*See* below)

Government is taking steps to notify for prohibiting marketing of the drugs falling under these categories in consultation with Ministry of Law.

Statement

1. Fixed dose combination of tran quillizers with analgesics—antipyre tics .

2. Fixed dose combination of Pyra-zinamide and other anti-T.B. drugs.

3. Fixed dose combination of anti ulcer (H2 receptor antagonist, such as cimetidine, Ranitidine, etc) with other drugs.

4. Fixed dose combination of essen tial oils with alcohol with percentage higher than 20 per cent proof.

5. Fixed dose combination of chlo roform with other drugs.

Non inclusion of ferrous sulphate tablets under price control order

146. SHRI DAYANAND SAHAY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to answer to Unstared Question 3506 given in the Rajya Sabha on the 9th December, 1987 and state:

(a) whether it is a fact that Ferrous Sulphate Tablets are used under Maternal and Child Health Programme;

(b) whether it is also a fact that Ferrous Sulphate is not imported and country is self sufficient;

(c) whether it is also a fact that as per the policy decision, the Minis try of Health and Family Welfare is to recommend of drugs used for Health Programme for price control:

(d) whether the. prices of Ferous Sulphate Tablets, such as Fersolate Tablets, have gone up by 100 per cent; and

(e) what are the reasons for re commending which the Ministry of Health and Family Welfare for price control Ferrous Sulphate and allowed the consumer to be overcharged when 80 per cent of the population is suffering from anaemic deficiency and 60 per cent of pregnant women?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) Yes, Sir.

(b) The production and availability of drugs is controlled by Department of Chemicals, Minisry of Industry.

(c) Yes, Sir.

(d) The pricing is monitored by the Department of Chemicals.

(e) Ferrous Sulphate has no!, been recommended as yet for prica control.

Essential drugs

147. DR. (SMT.) SAROJINI MAHISHI: Will the Miinister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether his Ministry has compiled a list of essential drugs;

(b) if so, what are the names of those drugs, alongwith the indication for which each is used;

(c) whether it is also a fact that the list was compiled by d committee; and

(d) if so, what are the names of the members, alongwith designation and organisation which each one of them represent?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI MOTI LAL VORA): (a) and (b) Ministry